



A03-0020 7/25/01

# ***National Environmental Achievement Track***

## ***Application Form***

Lockheed Martin-Naval Electronics & Surveillance Systems-Marine Systems

Name of facility

Lockheed Martin

Name of parent company (if any)

2323 Eastern Boulevard

Street address

Mail Point #90

Street address (continued)

Baltimore, Maryland 21220-4207

City/State/Zip code

Give us information about your contact person for the  
National Environmental Achievement Track Program.

Name Ned Moore

Title Senior Environmental Engineer

Phone (410) 682-1291

Fax (410) 682-1270

E-mail edgar.o.moore.iv@lmco.com

### ***Why do we need this information?***

EPA needs background information on your facility to evaluate your application.

### ***What do you need to do?***

- Provide background information on your facility.
- Identify your environmental requirements.

# *Section A*

*Tell us about your facility.*

1 What do you do or make at your facility?

NE&SS-Marine Systems has a proud heritage of designing and building advanced technology products. We are recognized as the industry leader in design, manufacture, and support of the world's premier missile launching system, the MK 41 Vertical Launching System (VLS), as well as being a leader in the design of some of the most advanced ship hull forms operating today. Our mission is to build top-quality, affordable systems.

2 List the Standard Industrial Classification (SIC) code(s) or North American Industrial Classification System (NAICS) codes that you use to classify business at your facility.

SIC  
3489

NAICS  
332995

3 Does your company meet the Small Business Administration definition of a small business for your sector?

☐ Yes

☒ No

4 How many employees (full-time equivalents) currently work at your facility?

☐ Fewer than 50

☐ 50-99

☐ 100-499

☒ 500-1,000

☐ More than 1,000

## Section A, continued

5 Does your facility have an EPA ID number(s)?

☒ Yes

☐ No

If yes, list in the right-hand column.

MDC003419090

6 Identify the environmental requirements that apply to your facility. Use the Environmental Requirements Checklist, at the back of the instructions, as a reference. List your requirements to the right **or** enclose a completed Checklist with your application.

(SEE CHECKLIST ATTACHED)

7 Check the appropriate box in the right-hand column.

☐ I've listed the requirements above.

☒ I've enclosed the Checklist with my application.

8 Optional: Is there anything else you would like to tell us about your facility?

Noteworthy accomplishments:

- Achieved ISO 14001 in March 2001
- Membership in Business for the Bay
- Participant in the Maryland Department of the Environment-Ozone Action Days

# Section B

*Tell us about your EMS.*

## ***Why do we need this information?***

Facilities must have an operating Environmental Management System (EMS) that meets certain requirements.

## ***What do you need to do?***

- Confirm that your EMS meets the Achievement Track requirements.
- Tell us if you have completed a self-assessment or have had a third-party assessment of your EMS.

1 Check **yes** if your EMS meets the requirements for each element below as defined in the instructions.

*a.* Environmental policy

☒ Yes

*b.* Planning

☒ Yes

*c.* Implementation and operation

☒ Yes

*d.* Checking and corrective action

☒ Yes

*e.* Management review

☒ Yes

2 Have you completed at least one EMS cycle (plan-do-check-act)?

☒ Yes

3 Did this cycle include both an EMS and a compliance audit?

☒ Yes

4 Have you completed an objective self-assessment or third-party assessment of your EMS?

☒ Yes

If yes, what method of EMS assessment did you use?

☐ Self-assessment

☐ GEMI

☐ Other

☐ CEMP

☒ Third-party assessment

☒ ISO 14001 Certification

☐ Other

### ***Why do we need this information?***

Facilities must show that they are committed to improving their environmental performance. This means that you can describe past achievements and will make future commitments.

### ***What do you need to do?***

Refer to the Environmental Performance Table in the instructions to answer questions 1 and 2.

# Section C

*Tell us about your past achievements and future commitments.*

- 1 Describe your past achievements for at least two environmental aspects. If you need more space than is provided, attach copies of this page.

**Note to small facilities:** If you qualify as a small facility as defined in the instructions, you are required to report past achievement for at least one environmental aspect.

### ***First aspect you've selected***

What aspect have you selected?	What was the previous level (1999)?		What is the current level (2000)?	
	Quantity	Units	Quantity	Units
Reduction in <b>Hazardous Waste</b> generation.	5.9	tons	4.05	tons
<p>i. How is the current level an improvement over the previous level?</p> <p>We achieved a <u>21.9%</u> reduction in tonnage of Hazardous Waste generated between 1999 &amp; 2000.</p>				
<p>ii. How did you achieve this improvement?</p> <ul style="list-style-type: none"><li>• Re-evaluation of all waste streams to determine if waste is regulated.</li><li>• Stressing in New Employee Orientation, the need to segregate Hazardous and Non-Hazardous Waste.</li><li>• Annual Satellite Accumulation Training, stressing Waste Minimization and Pollution Prevention activities including:<ol style="list-style-type: none"><li>1. Identify and implement ways to avoid, reduce, or eliminate the generation of Hazardous Waste.</li><li>2. Practice contamination control.</li><li>3. Waste segregation.</li><li>4. Educate personnel on the need for using techniques to reduce waste generation.</li></ol></li></ul>				

### Second aspect you've selected

What aspect have you selected?	What was the previous level (1999)?	What is the current level (2000)?								
Reduction in <b>Solid Waste</b> generation.	<table style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%;">Quantity</th> <th style="width: 50%;">Units</th> </tr> <tr> <td style="text-align: center;">106.39</td> <td style="text-align: center;">tons</td> </tr> </table>	Quantity	Units	106.39	tons	<table style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%;">Quantity</th> <th style="width: 50%;">Units</th> </tr> <tr> <td style="text-align: center;">90.42</td> <td style="text-align: center;">tons</td> </tr> </table>	Quantity	Units	90.42	tons
Quantity	Units									
106.39	tons									
Quantity	Units									
90.42	tons									
<p>i. How is the current level an improvement over the previous level?</p> <p>We achieved a <b>17.6%</b> reduction in tonnage of Solid Waste generated between 1999 &amp; 2000.</p> <p>ii. How did you achieve this improvement?</p> <ul style="list-style-type: none"> <li>Continual communication and emphasis on need for recycling wherever possible.</li> <li>Stressing in New Employee Orientation, the need to segregate Recyclables from Solid Waste.</li> <li>Quarterly ESH Audits of programs/departments to ensure proper Recycling procedures are being followed and to determine additional recycling areas are identified.</li> <li>Working with Facilities on all projects to maximize Recycling and to minimize Solid Waste generation.</li> <li>Recycling Training</li> <li>Source Reduction</li> </ul>										

- 2 Select at least four environmental aspects (no more than two from any one category) from the Environmental Performance Table in the instructions and then tell us about your future commitments. If you need more space than is provided, attach copies of this section.

**Note to small facilities:** If you are a small facility, you are required to make commitments for at least two environmental aspects in two different categories.

### First aspect you've selected

- a. What is the aspect? Elimination of all Class II ODCs
- b. Is this aspect identified as significant in your EMS? ☐ Yes ☒ No

## Section C, continued

c. What is the current level? You may choose to state this as an absolute value or in terms of units of production or output.

☒ Option A:  
Absolute value (2000) 25 Lbs./Year  
(Quantity/Units)

☐ Option B:  
In terms of  
units of production  
or output

d. What is the improvement you are committing to over the next three years? You may choose to state this as an absolute value or in terms of units of production or output.

☒ Option A:  
Absolute value Eliminate all usage of all  
Class II ODCs.  
(Quantity/Units)

☐ Option B:  
In terms of  
units of production  
or output

e. How will you achieve this improvement?

Find alternative material or formulation, which is ODC free.

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### Second aspect you've selected

a. What is the aspect?

Reduction in Hazardous Waste generation.

b. Is this aspect identified as significant in your EMS?

☒ Yes ☐ No

c. What is the current level? You may choose to state this as an absolute value or in terms of units of production or output.

☒ Option A:  
Absolute value (2000) 4.05 Tons/Year  
(Quantity/Units)

☐ Option B:  
In terms of  
units of production  
or output

d. What is the improvement you are committing to over the next three years? You may choose to state this as an absolute value or in terms of units of production or output.

☒ Option A:  
Absolute value 10% Reduction  
(2001) 3.6 Tons/year  
(Quantity/Units)

☐ Option B:  
In terms of  
units of production  
or output

e. How will you achieve this improvement?

- Capital improvements to minimize Hazardous Waste generation and maximize collection efficiency.
- Re-evaluation of all waste streams to determine if waste is regulated.
- Stressing in New Employee Orientation, the need to segregate Hazardous and Non-Hazardous Waste.
- Annual Satellite Accumulation Training stressing waste minimization and pollution prevention activities including:
  1. Identify and implement ways to avoid, reduce, or eliminate the generation of Hazardous Waste.
  2. Practice contamination control.
  3. Waste Segregation
  4. Educate personnel on the need for using techniques to reduce waste generation.

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### Third aspect you've selected

a. What is the aspect?

Reduction in Solid Waste generation.

b. Is this aspect identified as significant in your EMS?

☒ Yes ☐ No

c. What is the current level? You may choose to state this as an absolute value or in terms of units of production or output.

☒ Option A:  
Absolute value (2000) 90.42 Tons/Year  
(Quantity/Units)

☐ Option B:  
In terms of  
units of production  
or output

d. What is the improvement you are committing to over the next three years? You may choose to state this as an absolute value or in terms of units of production or output.

☒ Option A:  
Absolute value 10% Reduction  
(2001) 81.37 Tons/Year  
(Quantity/Units)

☐ Option B:  
In terms of  
units of production  
or output



e. How will you achieve this improvement?

- Capital improvement to minimize Solid Waste generation and maximize collection efficiency.
- Stressing in New Employee Orientation, the need to segregate Recyclables from Solid Waste.
- Quarterly ESH Audits of programs/departments to ensure proper Recycling procedures are being followed and to determine additional Recycling areas are identified.
- Working with Facilities on all projects to maximize Recycling and minimize Solid Waste generation.
- Recycling Training
- Source Reduction

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***Fourth aspect you've selected***

a. What is the aspect?

Material Reuse & Recycling of Toner Cartridges

b. Is this aspect identified as significant in your EMS?

☒ Yes ☐ No

c. What is the current level? You may choose to state this as an absolute value or in terms of units of production or output.

☒ Option A: (2000)  
Absolute value 432 Cartridges  
Recycled/Year

☐ Option B:  
In terms of  
units of production  
or output

d. What is the improvement you are committing to over the next three years? You may choose to state this as an absolute value or in terms of units of production or output.

☒ Option A: (2001)  
Absolute value 5% Increase  
454 Cartridges  
Recycled/Year

☐ Option B:  
In terms of  
units of production  
or output

Note:  
1999 0 Recycled

e. How will you achieve this improvement?

- Provide Recycling Training to all effected employees.
- Perform quarterly ESH Audits to ensure all program areas and operations are reusing and recycling all spent toner cartridges.

# Section D

*Section D, continued*

*Tell us about your public outreach and reporting.*

## ***Why do we need this information?***

Facilities must demonstrate their commitment to public outreach and performance reporting. You should have appropriate mechanisms in place to identify community concerns, to communicate with the public, and to provide information on your environmental performance.

## ***What do you need to do?***

- Describe your approach to public outreach.
- List three references who are familiar with your facility.

1 How do you identify and respond to community concerns?

Primary point of contact within the community is the Local Emergency Planning Committee (LEPC) for Baltimore County, which meets monthly. Concerns expressed by the community would likely be communicated through the LEPC, local police or municipal officials.

2 How do you inform community members of important matters that affect them?

Community members are initially informed through the LEPC who in turn disseminate the information. Direct communications from our Communications Department representatives would occur via telephone and through the local media.

3 How will you make the Achievement Track Annual Performance Report available to the public?

☒ Website <http://ness.external.lmco.com/nessb/>

☐ Newspaper

☒ Open Houses

☐ Other

All inquiries from the news media or general public shall be referred to the Office of Communications & Public Affairs. The Office of Communications & Public Affairs shall be responsible for and have authority to approve responses to inquiries, admittance of reporters, public interest groups, etc., beyond the plant lobby, on a case by case basis. The Program Manager or Contract Administrator in conjunction with ESH and/or Systems Safety Engineering Department handles responses to ESH inquiries from customers and clients.

ESH will handle communications with the following:

- Regulatory Agencies

3 **(CONTINUED)**

How will you make the Achievement Track Annual Performance Report available to the public?

- Businesses or other interested organizations for the routine exchange of information regarding our ESH Programs. Depending on the nature of the inquiry, the response may be directed through the Office of Communications & Public Affairs.
- Any Environmental Safety or Health inquiries, which are other than routine, must be promptly reported to Corporate ESH as per Corporate Functional Procedure ESH-01.

ESH will utilize a conversation/telephone log to document the communication between NE&SS-Marine Systems ESH and regulatory agencies, interested organizations, and/or the public, on a case by case basis.

## Section D, continued

- 4 Are there any ongoing citizen suits against your facility? ☐ Yes ☒ No

If yes, describe briefly in the right-hand column.

- 5 List references below

	<i>Organization</i>	<i>Name</i>	<i>Phone number</i>
<i>Representative of a Community/ Citizen Group</i>	Businesses for the Bay Alliance for the Chesapeake Bay	April Marcy	(410) 267-5719
<i>State/Local Regulator</i>	Maryland Department of the Environment Air & Radiation Management Baltimore County	Randy Mosier	(410) 631-3240
<i>Other community/local reference</i>	Baltimore County Local Emergency Planning Committee	Chris Howley	(410) 887-4890

# Section E

## *Application and Participation Statement.*

On behalf of Lockheed Martin NE&SS-Marine Systems

I certify that

- I have read and agree to the terms and conditions, as specified in the *National Environmental Achievement Track Program Description* and in the *Application Instructions*;
- I have personally examined and am familiar with the information contained in this Application (including, if attached, the Environmental Requirements Checklist). The information contained in this Application is, to the best of my knowledge and based on reasonable inquiry, true, accurate, and complete, and I have no reason to believe the facility would not meet all program requirements;
- My facility has an environmental management system (EMS), as defined in the Achievement Track EMS requirements, including systems to maintain compliance with all applicable federal, state, tribal, and local environmental requirements, in place at the facility, and the EMS will be maintained for the duration of the facility's participation in the program;
- My facility has conducted an objective assessment of its compliance with all applicable federal, state, tribal, and local environmental requirements, and the facility has corrected all identified instances of potential or actual noncompliance;
- Based on the foregoing compliance assessment and subsequent corrective actions (if any were necessary), my facility is, to the best of my knowledge and based on reasonable inquiry, currently in compliance with applicable federal, state, tribal, and local environmental requirements.

I agree that EPA's decision whether to accept participants into or remove them from the National Environmental Achievement Track is wholly discretionary, and I waive any right that may exist under any law to challenge EPA's acceptance or removal decision.

I am the senior facility manager and fully authorized to execute this statement on behalf of the corporation or other legal entity whose facility is applying to this program.

Signature/Date

Printed Name/Title Dale Bennett, Vice President & General Manager, NE&SS-Marine Systems

Facility Name Lockheed Martin, Naval Electronics & Surveillance Systems-Marine Systems

Facility Street Address 2323 Eastern Boulevard, Baltimore, Maryland 21220-4207

Facility ID Numbers MDC003419090

## National Environmental Achievement Track

### *Environmental Requirements Checklist*

The following Checklist is provided to assist facilities in answering Section A, "Tell us about your facility," Question 6. The Checklist is given to help facilities identify the major federal, state, tribal, and local environmental requirements applicable at their facilities. The Checklist is not intended to be an exhaustive list of all environmental requirements that may be applicable at an individual facility.

If you use this Checklist and choose to submit it with your application, fill in your facility information below and enclose the completed Checklist with your application (see instructions).

**Facility Name** Lockheed Martin-Naval Electronic & Surveillance Systems-Marine Systems  
**Facility Location:** Baltimore/MD/21220  
**Facility ID Number(s):** MDC003419090  
*(attach additional sheets if necessary)*

#### **Air Pollution Regulations**

Check All  
That Apply

1. National Emission Standards for Hazardous Air Pollutants (40 CFR 61)
2. Permits and Registration of Air Pollution Sources
3. General Emission Standards, Prohibitions and Restrictions
4. Control of Incinerators
5. Process Industry Emission Standards
6. Control of Fuel Burning Equipment
7. Control of VOCs
8. Sampling, Testing and Reporting
9. Visible Emissions Standards
10. Control of Fugitive Dust
11. Toxic Air Pollutants Control
12. Vehicle Emissions Inspections and Testing

<input type="checkbox"/>
<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input checked="" type="checkbox"/>
<input type="checkbox"/>

**Other Federal, State, Tribal or Local Air Pollution Regulations Not Listed Above (identify)**

- |     |                          |
|-----|--------------------------|
| 13. | <input type="checkbox"/> |
| 14. | <input type="checkbox"/> |

#### **Hazardous Waste Management Regulations**

1. Identification and Listing of Hazardous Waste (40 CFR 261)
  - Characteristic Waste
  - Listed Waste
2. Standards Applicable to Generators of Hazardous Waste (40 CFR 262)
  - Manifesting
  - Pre-transport requirements
  - Record keeping/reporting

<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>
<input type="checkbox"/>
<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>

3. Standards Applicable to Transporters of Hazardous Waste (40 CFR 263)
  - Transfer facility requirements ☐
  - Manifest system and record-keeping ☐
  - Hazardous waste discharges ☐
4. Standards for Owners and Operators of TSD Facilities (40 CFR 264)
  - General facility standards ☐
  - Preparedness and prevention ☐
  - Contingency plan and emergency procedures ☐
  - Manifest system, Record keeping and reporting ☐
  - Groundwater protection ☐
  - Financial requirements ☐
  - Use and management of containers ☐
  - Tanks ☐
  - Waste piles ☐
  - Land treatment ☐
  - Incinerators ☐
5. Interim Status Standards for TSD Owners and Operators (40 CFR 265) ☐
6. Interim Standards for Owners and Operators of New Hazardous Waste Land Disposal Facilities (40 CFR 267) ☐
7. Administered Permit Program (Part B) (40 CFR 270) ☐

**Other Federal, State, Tribal or Local Hazardous Waste Management Regulations Not Listed Above (identify)**

8. ☐
9. ☐

**Hazardous Materials Management**

1. Control of Pollution by Oil and Hazardous Substances (33 CFR 153) ☒
2. Designation of Reportable Quantities and Notification of Hazardous Materials Spill (40 CFR 302) ☒
3. Hazardous Materials Transportation Regulations (49 CFR 172-173) ☒
4. Worker Right-to-Know Regulations (29 CFR 1910.1200) ☒
5. Community Right-to-Know Regulations (40 CFR 350-372) ☒

**Other Federal, State, Tribal or Local Hazardous Materials Management Regulations Not Listed Above (identify)**

6. ☐
7. ☐

**Solid Waste Management**

1. Criteria for Classification of Solid Waste Disposal Facilities and Practices (40 CFR 257) ☐
2. Permit Requirements for Solid Waste Disposal Facilities ☐
3. Installation of Systems of Refuse Disposal ☐
4. Solid Waste Storage and Removal Requirements ☒
5. Disposal Requirements for Special Wastes ☐

**Other Federal, State, Tribal or Local Solid Waste Management Regulations Not Listed Above (identify)**



- |    |                          |
|----|--------------------------|
| 6. | <input type="checkbox"/> |
| 7. | <input type="checkbox"/> |

**Water Pollution Control Requirements**

- |   |                                     |
|---|-------------------------------------|
| 1. Oil Spill Prevention Control and Countermeasures (SPCC) (40 CFR 112)                                 | <input type="checkbox"/>            |
| 2. Designation of Hazardous Substances (40 CFR 116)   | <input type="checkbox"/>            |
| 3. Determination of Reportable Quantities for Hazardous Substances (40 CFR 117)                         | <input checked="" type="checkbox"/> |
| 4. NPDES Permit Requirements (40 CFR 122)   | <input type="checkbox"/>            |
| 5. Toxic Pollutant Effluent Standards (40 CFR 129)  | <input type="checkbox"/>            |
| 6. General Pretreatment Regulations for Existing and New Sources (40 CFR 403)                           | <input type="checkbox"/>            |
| 7. Organic Chemicals Manufacturing Point Source Effluent Guidelines and Standards (40 CFR 414)          | <input type="checkbox"/>            |
| 8. Inorganic Chemicals Manufacturing Point Source Effluent Guidelines and Standards (40 CFR 415)        | <input type="checkbox"/>            |
| 9. Plastics and Synthetics Point Source Effluent Guidelines and Standards (40 CFR 416)                  | <input type="checkbox"/>            |
| 10. Water Quality Standards   | <input type="checkbox"/>            |
| 11. Effluent Limitations for Direct Dischargers   | <input type="checkbox"/>            |
| 12. Permit Monitoring/Reporting Requirements  | <input type="checkbox"/>            |
| 13. Classifications and Certifications of Operators and Superintendents of Industrial Wastewater Plants | <input type="checkbox"/>            |
| 14. Collection, Handling, Processing of Sewage Sludge   | <input type="checkbox"/>            |
| 15. Oil Discharge Containment, Control and Cleanup  | <input type="checkbox"/>            |
| 16. Standards Applicable to Indirect Discharges (Pretreatment)  | <input type="checkbox"/>            |

**Other Federal, State, Tribal or Local Water Pollution Control Regulations Not Listed Above (identify)**

- |  |                                     |
|--|-------------------------------------|
| 17. Wastewater Discharge Permit/Sanitary | <input checked="" type="checkbox"/> |
| 18.                                      | <input type="checkbox"/>            |

**Drinking Water Regulations**

- |  |                          |
|--|--------------------------|
| 1. Underground Injection and Control Regulations, Criteria and Standards (40 CFR 144, 146) | <input type="checkbox"/> |
| 2. National Primary Drinking Water Standards (40 CFR 141)                                  | <input type="checkbox"/> |
| 3. Community Water Systems, Monitoring and Reporting Requirements (40 CFR 141)             | <input type="checkbox"/> |
| 4. Permit Requirements for Appropriation/Use of Water from Surface or Subsurface Sources   | <input type="checkbox"/> |
| 5. Underground Injection Control Requirements  | <input type="checkbox"/> |
| 6. Monitoring, Reporting and Record keeping Requirements for Community Water Systems       | <input type="checkbox"/> |

**Other Federal, State, Tribal or Local Drinking Water Regulations Not Listed Above(identify)**

- |    |                          |
|----|--------------------------|
| 7. | <input type="checkbox"/> |
| 8. | <input type="checkbox"/> |

**Toxic Substances**

- |  |                                     |
|--|-------------------------------------|
| 1. Manufacture and Import of Chemicals, Record keeping and Reporting Requirements (40 CFR 704) | <input type="checkbox"/>            |
| 2. Import and Export of Chemicals (40 CFR 707)   | <input checked="" type="checkbox"/> |
| 3. Chemical Substances Inventory Reporting Requirements (40 CFR 710)                           | <input type="checkbox"/>            |
| 4. Chemical Information Rules (40 CFR 712)   | <input type="checkbox"/>            |
| 5. Health and Safety Data Reporting (40 CFR 716)   | <input type="checkbox"/>            |
| 6. Pre-Manufacture Notifications (40 CFR 720)  | <input type="checkbox"/>            |
| 7. PCB Distribution Use, Storage and Disposal (40 CFR 761)                                     | <input checked="" type="checkbox"/> |
| 8. Regulations on Use of Fully Halogenated Chlorofluoroalkanes (40 CFR 762)                    | <input type="checkbox"/>            |
| 9. Storage and Disposal of Waste Material Containing TCDD (40 CFR 775)                         | <input type="checkbox"/>            |

**Other Federal, State, Tribal or Local Toxic Substances Regulations Not Listed Above (identify)**

- |     |                          |
|-----|--------------------------|
| 10. | <input type="checkbox"/> |
| 11. | <input type="checkbox"/> |

**Pesticide Regulations**

- |  |                          |
|--|--------------------------|
| 1. FIFRA Pesticide Use Classification (40 CFR 162)                               | <input type="checkbox"/> |
| 2. Procedures for Disposal and Storage of Pesticides and Containers (40 CFR 165) | <input type="checkbox"/> |
| 3. Certification of Pesticide Applications (40 CFR 171)                          | <input type="checkbox"/> |
| 4. Pesticide Licensing Requirements  | <input type="checkbox"/> |
| 5. Labeling of Pesticides  | <input type="checkbox"/> |
| 6. Pesticide Sales, Permits, Records, Application and Disposal Requirements      | <input type="checkbox"/> |
| 7. Disposal of Pesticide Containers  | <input type="checkbox"/> |
| 8. Restricted Use and Prohibited Pesticides                                      | <input type="checkbox"/> |

**Other Federal, State, Tribal or Local Pesticides Regulations Not Listed Above (identify)**

- |     |                          |
|-----|--------------------------|
| 9.  | <input type="checkbox"/> |
| 10. | <input type="checkbox"/> |

**Environmental Clean-Up, Restoration, Corrective Action**

- |  |                          |
|--|--------------------------|
| 1. Comprehensive Environmental Response, Compensation and Liability Act (Superfund) (identify) | <input type="checkbox"/> |
|  | <input type="checkbox"/> |
| 2. RCRA Corrective Action (identify)   | <input type="checkbox"/> |
|  | <input type="checkbox"/> |

**Other Federal, State, Tribal or Local Environmental Clean-Up, Restoration, Corrective Action Regulations Not Listed Above (identify)**

- |    |                          |
|----|--------------------------|
| 3. | <input type="checkbox"/> |
| 4. | <input type="checkbox"/> |

The National Environmental Performance Track is a U.S. Environmental Protection Agency program. Please direct inquiries to 1-888-339-PTRK or e-mail [ptrack@indecon.com](mailto:ptrack@indecon.com). Mail completed applications to:

The Performance Track Information Center  
c/o Industrial Economics Incorporated  
2067 Massachusetts Avenue  
Cambridge, MA 02140